

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006387

FILED
Jan 19, 2009
Secretary of State

Entity Name: GATEWAY ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

1436 BERKLEY ROAD
AUBURNDALE, FL 33823 US

New Principal Place of Business:

Current Mailing Address:

1436 BERKLEY ROAD
AUBURNDALE, FL 33823 US

New Mailing Address:

FEI Number: 59-3545931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENIGSMITH, BOBBY
5626 VIBURNUM COURT
POLK CITY, FL 338683031 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HENIGSMITH, BOBBY
Address: 5626 VIBURNUM COURT
City-St-Zip: POLK CITY, FL 33868

Title: VD () Delete
Name: HOLMES, BILLY
Address: 107 HERRICK ST
City-St-Zip: AUBURNDALE, FL 33823

Title: SD () Delete
Name: MILLER, DOUG
Address: 3214 DECATOR AVE
City-St-Zip: LAKE LAND, FL 33805

Title: T () Delete
Name: MILLER, MARY
Address: 249 WATERVIEW CIR
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BOBBY HENIGSMITH

PD

01/19/2009

Electronic Signature of Signing Officer or Director

Date